a l)	CANDIDATE'S REPO be filed by a candidate or his principal campaign	
1. Qualitying Harme and Address of Candidate John E. Billens 271 Bad Byrns Rd LEESVILLE, LA 71444	2. Office Sought (Include life of office he well as parish, city, town and/or election district.) VSRNO ALTARISH TOLICE JUSEY DISTRICT LO	9/23 06378
3. Date of Primary 90CT 03		
This report powers from 451003	through <u>22 Sep #3</u>	
4. Type of Report:		
180th day prior to primary	40lh day after general	
90th day prior to primary	Annual (future election)	
SOth day prior to primary	Supplemental (past election)	,
10th day prior to primary		
10th day prior to general	Amendment to prior report	·
5. FINAL REPORT II:	· · · · · · · · · · · · · · · · · · ·	1
WithdrawnFiled affu	of the election AND all loans and debts paid	
Unopposed		
6. Name and Address of Financial Institution (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all comparish funds.) BANK ONS, NA BATAN ROUGE, CA Acc \$30.115409\$	7. Full Name and Address of Treasurer	
9. Name of Person Preparing Report - Johns Daytime Telephone (337) 238-3703		
10. WE HEREBY CERTIFY that the information cor is true and correct to the best of our knowledge, infor been made nor contributions repaired that have no required to be reported by the Louisians Campaign omitted.	mation and belief, and that no expenditures have a been reported herein, and that no information	FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY Name and address of principal dampaign committees, committees, principal dampaign committees, if any (use additional sheets if necessary).
This <u>22 day of 5x p</u>	<u>23</u>	
1/- 1	/X	
Signature of Candidate/Chairperson (To be signed by Chairperson only if report by principal campaign committee)	(337) 238 - 3703 Daylime Telephone	152 13 - 151 14 - 151 15 - 151
Signature of Treesurer From 102 Rev. 186, Page Sev. 200	Daytime Telephone	r-d 1-0

SUMMARY PAGE

RECEIPTS	This Period
Contributions (Schedule A-1)	<i>Ø</i>
2. In-kind Contributions (Schedule A-2)	ප
Campaign paraphernalia sales of \$25 or less	0
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 +8)	Ö
5. Other Receipts (Schedule A-3)	(5
6. Loans Received (Schedule B)	<i>t</i> 5
7. Loan Repayments Received (Schedule D)	دع
8. TOTAL RECEIPTS (Lines 4+5+6+7)	<i>(</i> 2)

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	# 73.97
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	
2. Funds Loaned (Schedule D)	
13. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12)	

FINANCIAL SUMMARY	/ Amount
 Funds on hand at beginning of reporting period (Must equal funds on hand at close from last report or 40-11 (first report for this e) 	elaction)
15. Plus total receipts this period (Une Babove)	0
16. Less total disbursements this period (Line 13 above)	£73, YI
17. Less in-kind contributions (Line 2 above)	Ø
18. Funds on hand at close of reporting period	

SCHEDULE E-1: EXPENDITURES

Use this schedule to report information on all campaign expenditures for this reporting period. An "axpenditure" is any payment made for the purpose of supporting your election to public office and includes monles spent for the campaign's general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-2: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are optional. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page.

2. Expenditures this R e. Date(s)	c. Amount(s)	
9-6-03	GA5	#37.24
9-11-03	GAS	* 36.2!
:		
		17322
	9-6-03	9-6-03 GA5

Form 102, Rev. 3/98. Page Rev. 5/98.

SCHEDULE E-2: OTHER DISBURSEMENTS

This schedule is used to report those disbursements that are not "expenditures"; that is, monles paid by the campaign that are not paid for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include the payment of taxes or the refund of contributions. Disbursements should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the disbursement should state the reason the payment.

Name and Address of Recipient	2. Date(s)	3. Explanation(s)	4. Amount(s)
		1	
			
			1
		\	
			[
			•
Total OTHER DISBURSEMENTS during this			473 97

Form 102, Rev. 3/50, Page Rev. 3/64.